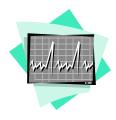
Portland Veterans Affairs Medical Center

Electrical Cardioversion

What is electrical cardioversion?

Electrical cardioversion is used to make your heart beat normally by passing an electric shock across and through the chest. The electric shock is used most often to revive a person when the heart stops. It restores normal heart rhythm and has saved many lives. It is a very safe way to change an abnormal heart rhythm to normal.





The single, rapid, high-voltage electric shock to the heart causes all the heart muscle cells to stop beating for a moment. This allows your heart to restart itself with a normal heart rhythm. The heart then beats normally again. To be successful, the shock must be delivered at just the right time during a heartbeat.

When is it used?

Abnormal heart rhythms (arrhythmias), such as atrial tachycardia and ventricular tachycardia, may cause very rapid heart rates. The heart rate may be so fast that the blood does not circulate well. For some people with coronary artery or heart valve disease, this fast heartbeat may be life threatening. Cardioversion can quickly restore normal circulation.

Some other rhythm problems, such as atrial flutter or atrial fibrillation, are not very fast but are abnormal and inefficient. Having such rhythms for days or weeks can lead to serious problems, such as heart failure and strokes.

Medicine is sometimes used to try to return the heart to a normal rhythm. In many cases electric cardioversion is safer and more effective than drug treatment.



How do I prepare for electrical cardioversion?

If the arrhythmia is life threatening, cardioversion is done without delay or special preparation.

For a planned cardioversion, follow any instructions your health care provider may give you. You may eat a light meal, such as soup or salad, the night before the procedure. Do not eat or drink anything after midnight and the morning before the procedure.

Plan for your care and recovery after the procedure.

What happens during the procedure?

You will be given a tranquilizer and a sedative (a light general anesthetic). These drugs will relax your muscles and put you to sleep. You will not feel pain during the procedure. The health care provider will put electrodes on your chest and back and deliver an electric shock through your chest for a fraction of a second. The electrical charge passes through two large, hand-held electrode paddles or two large adhesive patches placed on your chest. Abnormal heart rhythms usually return to normal with the first shock, but more shocks may be needed. Your health care provider will check your heart rhythm with an electrocardiogram (ECG, or EKG).

You will probably be unconscious from the anesthesia for less than 5 minutes and will not remember the shock.

What happens after the procedure?

You will be monitored in the recovery room or coronary care unit for a short time. Your chest might be a little sore. You may have ringlike marks on your chest where the electrode paddles were placed. These marks will fade after several days.

When you are fully recovered from the anesthesia, you will probably be allowed to go home. Sometimes you may need to stay in the hospital overnight. The health care provider may prescribe drugs to help your heart keep its new rhythm.

Ask your health care provider what you should do to take care of yourself and when you should come back for a checkup.

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